Because recognition of pregnancy status is critical to identifying patients most at risk for severe maternal morbidity and mortality, a frequent recommendation throughout the Alliance for Innovation on Maternal Health (AIM) patient safety bundles and other resources is screening for current or recent pregnancy in the prior 12 months.

Variations in laws and restrictions related to reproductive health in the United States by state and jurisdiction may lead to complexity and challenges around this recommendation. The intention of this screening recommendation is simply to contextualize presenting patient symptoms.

It should be noted that:

- There is no evidence supporting the performance of routine biological pregnancy testing outside of clinical indication in most settings.

- Timing, not outcome or resolution of a pregnancy, is the impetus behind this verbal screening recommendation and eliciting details on the outcome of a pregnancy is not required to meet this recommendation.

- As with all potentially sensitive topics, the utmost care should be taken to provide patient privacy and confidentiality in addressing this topic in all settings of care as well as documentation of responses.

- Clinicians should remain aware of all state and local laws related to reproductive care and reporting that may impact the setting in which they care for patients.